



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Legacy Political Fund**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="4713.90"/>	<input type="text" value="4713.90"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1015.73"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="42428.21"/>	<input type="text" value="55503.73"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="43443.94"/>	<input type="text" value="60217.63"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25410.07"/>	<input type="text" value="42183.76"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="18033.87"/>	<input type="text" value="18033.87"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="41133.44"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Legacy Political Fund**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6000.00	10750.00
(ii) Unitemized .....	0.00	225.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6000.00	10975.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6000.00	10975.00
12. Transfers From Affiliated/Other Party Committees.....	31428.21	31428.21
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	48.33
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	5000.00	13052.19
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	42428.21	55503.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	42428.21	55503.73

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	23074.05	31157.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	23074.05	31157.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	2336.02	11026.43
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25410.07	42183.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25410.07	42183.76

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6000.00	10975.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6000.00	10975.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	23074.05	31157.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	48.33
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	23074.05	31109.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 38
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. Joshua R. Good**  
Full Name (Last, First, Middle Initial)

Mailing Address 1516 D Street, NE

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ICF International	Occupation Manager
---------------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2014

**Transaction ID : SA11AI.7000**

Amount of Each Receipt this Period  
1000.00

Contribution

**B. Steven T. Kirby**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 Riverview Hgts

City Sioux Falls	State SD	Zip Code 57105
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Bluestem Capital Company LLC	Occupation Private Equity
--	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5238.37

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2014

**Transaction ID : SA11AI.6969**

Amount of Each Receipt this Period  
5000.00

Contribution

**C.**  
Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6000.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. Legacy Victory Committee 2014**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 N Washington St Suite 700  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** C00558247  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 21389.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2014  
**Transaction ID : SA12.6997**  
 Amount of Each Receipt this Period  
 21389.10  
 JFC Transfer

**B. Timothy A. Koch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 N Washington St, Suite 700  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Koch & Hoos LLC Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 160.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : SA12.6997.0**  
 Amount of Each Receipt this Period  
 10.00  
**[MEMO ITEM]**

**C. Joseph V. Popolo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9002 Douglas Ave  
 City Dallas State TX Zip Code 75225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 The Freeman Company CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : SA12.6997.1**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	21389.10
<b>TOTAL</b> This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial) <b>A. Christine Popolo</b>		Date of Receipt MM / DD / YYYY 03 / 20 / 2014 <b>Transaction ID : SA12.6997.2</b>
Mailing Address 9002 Douglas Ave		Amount of Each Receipt this Period 500.00
City Dallas	State TX	Zip Code 75225
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. William Beecherl</b>		Date of Receipt MM / DD / YYYY 03 / 28 / 2014 <b>Transaction ID : SA12.6997.3</b>
Mailing Address 5950 Cedar Springs Rd Suite 200		Amount of Each Receipt this Period 2223.53
City Dallas	State TX	Zip Code 75235
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>
Name of Employer Beecherl Companies	Occupation Petro Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2223.53	

Full Name (Last, First, Middle Initial) <b>C. William Weaver</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 <b>Transaction ID : SA12.6997.4</b>
Mailing Address 1845 Woodall Rogers Freeway		Amount of Each Receipt this Period 517.65
City Dallas	State TX	Zip Code 75201
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b>
Name of Employer Retired	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 517.65	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. Howard Holsenbeck**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10 Lana Ln  
City Houston State TX Zip Code 77027  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed  
Occupation Real Estate Investor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2014  
**Transaction ID : SA12.6997.5**  
Amount of Each Receipt this Period  
1000.00  
**[MEMO ITEM]**

**B. David Underwood**  
Full Name (Last, First, Middle Initial)  
Mailing Address 909 Fannin Suite 1640  
City Houston State TX Zip Code 77010  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Wells Fargo Advisors, LLC  
Occupation Financial Advisor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 588.24

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2014  
**Transaction ID : SA12.6997.6**  
Amount of Each Receipt this Period  
588.24  
**[MEMO ITEM]**

**C. Thomas Eisenbook**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3 Pine Crescent Ct  
City Houston State TX Zip Code 77024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Alvarez & Marsal  
Occupation Business Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2014  
**Transaction ID : SA12.6997.7**  
Amount of Each Receipt this Period  
1000.00  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)  
**A. Mary Carol Markham**

Mailing Address 6143 Holly Springs

City Houston State TX Zip Code 77057

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2014

Transaction ID : SA12.6997.8

Amount of Each Receipt this Period  
 100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. Monty Bennett**

Mailing Address 14185 Dallas Pkwy Suite 1100

City Dallas State TX Zip Code 75254

FEC ID number of contributing federal political committee. **C**

Name of Employer Ashford Hospitality Trust Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2014

Transaction ID : SA12.6997.9

Amount of Each Receipt this Period  
 1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. Michael Battista**

Mailing Address 11 Orsinger Hill

City San Antonio State TX Zip Code 78230

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatrix Medical Group Occupation Neonatologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2014

Transaction ID : SA12.6997.10

Amount of Each Receipt this Period  
 588.24

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. David Feavel**  
Full Name (Last, First, Middle Initial)

Mailing Address 3506 Merrick St

City Houston State TX Zip Code 77025

FEC ID number of contributing federal political committee. **C**

Name of Employer ExL Petroleum LP Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : SA12.6997.11**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**

**B. Don H. Wills**  
Full Name (Last, First, Middle Initial)

Mailing Address 5949 Sherry Ln, Ste 1225

City Dallas State TX Zip Code 75225

FEC ID number of contributing federal political committee. **C**

Name of Employer Wills Capital Partners LP Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : SA12.6997.12**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**

**C. Lyle Asplin**  
Full Name (Last, First, Middle Initial)

Mailing Address 1615 Hoveden Dr

City Katy State TX Zip Code 77450

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 60.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : SA12.6997.13**

Amount of Each Receipt this Period  
 60.00

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial) <b>A. Martin O'Malley</b>		Date of Receipt MM / DD / YYYY 04 / 11 / 2014
Mailing Address 11722 Greenbay Dr		<b>Transaction ID : SA12.6997.14</b>
City Houston	State TX	Zip Code 77024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Colliers	Occupation Commercial RE Broker	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) <b>B. George W. Loewenbaum</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2014
Mailing Address 1000 Westbank Suite 2A		<b>Transaction ID : SA12.6997.15</b>
City Austin	State TX	Zip Code 78746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2352.94
Name of Employer Luminex Corporation	Occupation Chairman	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2352.94	

Full Name (Last, First, Middle Initial) <b>C. George Seay III</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2014
Mailing Address 325 North Saint Paul St Suite 3500		<b>Transaction ID : SA12.6997.16</b>
City Dallas	State TX	Zip Code 75201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Annandale Capital LLC	Occupation Chairman	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)  
**A. Catherine Taylor**

Mailing Address 8235 Douglas Ave  
Suite 1050

City Dallas State TX Zip Code 75225

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Investments

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2014

Transaction ID : SA12.6997.17

Amount of Each Receipt this Period  
100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. R. Steve Letbetter**

Mailing Address 3251 Del Monte

City Houston State TX Zip Code 77019

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2014

Transaction ID : SA12.6997.18

Amount of Each Receipt this Period  
100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. Paula Letbetter**

Mailing Address 3251 Del Monte

City Houston State TX Zip Code 77019

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 16 / 2014

Transaction ID : SA12.6997.19

Amount of Each Receipt this Period  
100.00

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. H. Lee Hobson**  
Full Name (Last, First, Middle Initial)

Mailing Address 4237 Armstrong Pkwy

City Dallas State TX Zip Code 75205

FEC ID number of contributing federal political committee. **C**

Name of Employer Highside Capital Mgmt Occupation Investment Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 04 / 16 / 2014  
Transaction ID : SA12.6997.20

Amount of Each Receipt this Period 100.00

[MEMO ITEM]

**B. John C. Goodman**  
Full Name (Last, First, Middle Initial)

Mailing Address 6335 W Northwest Hwy #2111

City Dallas State TX Zip Code 75225

FEC ID number of contributing federal political committee. **C**

Name of Employer Nat'l Center Policy Analysis Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 04 / 16 / 2014  
Transaction ID : SA12.6997.21

Amount of Each Receipt this Period 100.00

[MEMO ITEM]

**C. Richard R. Rogers**  
Full Name (Last, First, Middle Initial)

Mailing Address 16251 Dallas Pkwy

City Addison State TX Zip Code 75001

FEC ID number of contributing federal political committee. **C**

Name of Employer Mary Kay Cosmetics Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 17 / 2014  
Transaction ID : SA12.6997.22

Amount of Each Receipt this Period 5000.00

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. John D. Steinmetz**  
Full Name (Last, First, Middle Initial)

Mailing Address 4504 8th St

City Lubbock State TX Zip Code 79416

FEC ID number of contributing federal political committee. **C**

Name of Employer Vista Bank Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : SA12.6997.23**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**

**B. Carl H. Isett**  
Full Name (Last, First, Middle Initial)

Mailing Address 1122 Colorado St Suite 200

City Austin State TX Zip Code 78701

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : SA12.6997.24**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**

**C. AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 MORRIS DRIVE SUITE 100

City CHESTERBROOK State PA Zip Code 19355

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 166.66

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : SA12.6997.25**

Amount of Each Receipt this Period  
 166.66

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. James D. Frary**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3845 Greenbrier Dr  
 City Dallas State TX Zip Code 75225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Amerisource Bergen Occupation President, AB Specialty Group  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 166.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA12.6997.26**  
 Amount of Each Receipt this Period  
 166.66  
**[MEMO ITEM]**

**B. J. Baxter Brinkmann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4215 McEwen Rd  
 City Dallas State TX Zip Code 75244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Brinkmann Corporation Occupation President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA12.6997.27**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**

**C. Joseph P. DeWoody**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 471288  
 City Fort Worth State TX Zip Code 76147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Oil & Gas  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2014  
**Transaction ID : SA12.6997.28**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. David B. Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 3811 Turtle Creek Blvd  
Suite 1000

City Dallas State TX Zip Code 75219

FEC ID number of contributing federal political committee. **C**

Name of Employer EnCap Investments Occupation Managing Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1428.57

Date of Receipt  
04 / 17 / 2014  
**Transaction ID : SA12.6997.29**

Amount of Each Receipt this Period  
1428.57

**[MEMO ITEM]**

**B. Mary E. King**  
Full Name (Last, First, Middle Initial)

Mailing Address 5401 Lynbrook

City Houston State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C**

Name of Employer Not Provided Occupation Not Provided

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt  
04 / 21 / 2014  
**Transaction ID : SA12.6997.30**

Amount of Each Receipt this Period  
10.00

**[MEMO ITEM]**

**C. John L. Nau III**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 130130

City Houston State TX Zip Code 77219

FEC ID number of contributing federal political committee. **C**

Name of Employer Silver Eagle Distributers Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.24

Date of Receipt  
04 / 21 / 2014  
**Transaction ID : SA12.6997.31**

Amount of Each Receipt this Period  
588.24

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. Barbara E. Nau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 130130  
 City Houston State TX Zip Code 77219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Silver Eagle Distributors Occupation LP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 588.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA12.6997.32**  
 Amount of Each Receipt this Period  
 588.24  
**[MEMO ITEM]**

**B. S. Will VanLoh Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4007 Iverness Dr  
 City Houston State TX Zip Code 77019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Quantum Energy Partners Occupation Private Equity  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1176.47

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2014  
**Transaction ID : SA12.6997.33**  
 Amount of Each Receipt this Period  
 1176.47  
**[MEMO ITEM]**

**C. Todd Olsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3101 Perry Ln  
 City Austin State TX Zip Code 78731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Olsen & Company Occupation Political Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2014  
**Transaction ID : SA12.6997.34**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. Steven R. Birdwell**  
Full Name (Last, First, Middle Initial)

Mailing Address 9977 Sam Houston Pkwy N #100  
City Houston State TX Zip Code 77064

FEC ID number of contributing federal political committee. **C**

Name of Employer Remedial Construction Services Occupation President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 01 / 2014  
**Transaction ID : SA12.7098.1**

Amount of Each Receipt this Period 1000.00

**[MEMO ITEM]**

**B. Ashley Birdwell**  
Full Name (Last, First, Middle Initial)

Mailing Address 9977 W Sam Houston Pkwy N #100  
City Houston State TX Zip Code 77064

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 01 / 2014  
**Transaction ID : SA12.7098.2**

Amount of Each Receipt this Period 1000.00

**[MEMO ITEM]**

**C. Patrick O. Rayes**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 195429  
City Dallax State TX Zip Code 75219

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Oil & Gas Investments

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 02 / 2014  
**Transaction ID : SA12.7098.3**

Amount of Each Receipt this Period 5000.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. David Peacock**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 90300

City Houston	State TX	Zip Code 77290
FEC ID number of contributing federal political committee. C		
Name of Employer Tom Peacock Nissan/Cadillac	Occupation Auto Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2014  
**Transaction ID : SA12.7098.4**

Amount of Each Receipt this Period  
500.00

[MEMO ITEM]

**B. Don H. Wills**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5949 Sherry Ln, Ste 1225

City Dallas	State TX	Zip Code 75225
FEC ID number of contributing federal political committee. C		
Name of Employer Wills Capital Partners LP	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2014  
**Transaction ID : SA12.7098.5**

Amount of Each Receipt this Period  
1000.00

[MEMO ITEM]

**C. Vince Elliott**  
Full Name (Last, First, Middle Initial)  
Mailing Address 426 Tecumseh Ln

City Houston	State TX	Zip Code 77057
FEC ID number of contributing federal political committee. C		
Name of Employer Deutsche Bank	Occupation Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2014  
**Transaction ID : SA12.7098.6**

Amount of Each Receipt this Period  
500.00

[MEMO ITEM]

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

**A. Patricia M. Elliott**  
Full Name (Last, First, Middle Initial)  
Mailing Address 426 Tecumseh Ln  
City Houston State TX Zip Code 77057  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Homemaker Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 16 / 2014  
**Transaction ID : SA12.7098.7**  
Amount of Each Receipt this Period 500.00  
**[MEMO ITEM]**

**B. Todd Furniss**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 14973622  
City Sioux Falls State SD Zip Code 57186  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlendonTodd Capital LLC Occupation Managing Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1428.57

Date of Receipt 06 / 24 / 2014  
**Transaction ID : SA12.7098.8**  
Amount of Each Receipt this Period 1428.57  
**[MEMO ITEM]**

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	31428.21

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 38  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)  
**A. Steven T. Kirby**

Mailing Address 24 Riverview Hgts

City State Zip Code  
Sioux Falls SD 57105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bluestem Capital Company LLC Private Equity

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10238.37

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2014  
**Transaction ID : SA17.6971**

Amount of Each Receipt this Period  
5000.00

Non-Contribution Acct: Contribution

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)

**A. Constant Contact**

Mailing Address Reservoir Place  
1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
PAC Email Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6975**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Constant Contact**

Mailing Address Reservoir Place  
1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
PAC Email Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.7011**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Constant Contact**

Mailing Address Reservoir Place  
1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
PAC Email Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.7091**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)

**A. Jamie King**

Mailing Address 106 Panorama Ct

City Trophy Club State TX Zip Code 76262

Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6963**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Jamie King**

Mailing Address 106 Panorama Ct

City Trophy Club State TX Zip Code 76262

Purpose of Disbursement  
Reimbursement: Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6987**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Jamie King**

Mailing Address 106 Panorama Ct

City Trophy Club State TX Zip Code 76262

Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.7004**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)

**A. Jamie King**

Mailing Address 106 Panorama Ct

City State Zip Code  
Trophy Club TX 76262

Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	4

**Transaction ID : SB21B.7094**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. Koch & Hoos, LLC**

Mailing Address 901 N Washington St, Ste 700

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Accounting/Compliance Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	4

**Transaction ID : SB21B.7086**

Amount of Each Disbursement this Period

3	7	6	7	5	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Koch & Hoos, LLC**

Mailing Address 901 N Washington St, Ste 700

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Accounting/Compliance Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	4

**Transaction ID : SB21B.7087**

Amount of Each Disbursement this Period

7	5	1	9	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8	5	1	8	9	4	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)

**A. Maelstrom Technology Solutions LLC**

Mailing Address 200 S Executive Dr, Ste 101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2014

**Transaction ID : SB21B.6999**

Amount of Each Disbursement this Period

50.70

Category/Type

Full Name (Last, First, Middle Initial)

**B. Maelstrom Technology Solutions LLC**

Mailing Address 200 S Executive Dr, Ste 101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
PAC Web Hosting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2014

**Transaction ID : SB21B.7005**

Amount of Each Disbursement this Period

10.00

Category/Type

Full Name (Last, First, Middle Initial)

**C. Maelstrom Technology Solutions LLC**

Mailing Address 200 S Executive Dr, Ste 101

City Brookfield State WI Zip Code 53005

Purpose of Disbursement  
PAC Web Hosting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2014

**Transaction ID : SB21B.7082**

Amount of Each Disbursement this Period

10.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

70.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)

**A. Pixl Production**

Mailing Address 1845 Woodall Rodgers, Suite 1725

City State Zip Code  
Dallas TX 75201

Purpose of Disbursement  
PAC Website Development

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2014

**Transaction ID : SB21B.7001**

Amount of Each Disbursement this Period

1966.32

Full Name (Last, First, Middle Initial)

**B. Richardson Riley**

Mailing Address 95 Wolf Creek Blvd, Ste 2

City State Zip Code  
Dover DE 19901

Purpose of Disbursement  
PAC Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2014

**Transaction ID : SB21B.6991**

Amount of Each Disbursement this Period

736.92

Full Name (Last, First, Middle Initial)

**C. Ring Central Inc.**

Mailing Address 999 Baker Way, 5th Fl

City State Zip Code  
San Mateo CA 94404

Purpose of Disbursement  
PAC Phone Expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2014

**Transaction ID : SB21B.7009**

Amount of Each Disbursement this Period

36.87

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2740.11

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)

**A. Ring Central Inc.**

Mailing Address 999 Baker Way, 5th Fl

City San Mateo State CA Zip Code 94404

Purpose of Disbursement  
PAC Phone Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2014

Transaction ID : **SB21B.7089**

Amount of Each Disbursement this Period

36.87

Full Name (Last, First, Middle Initial)

**B. George Seay III**

Mailing Address 325 North Saint Paul St Suite 3500

City Dallas State TX Zip Code 75201

Purpose of Disbursement  
PAC Event Expense: Reception/Food & Bev./AV Support

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2014

Transaction ID : **SB21B.7003**

Amount of Each Disbursement this Period

1441.00

Full Name (Last, First, Middle Initial)

**C. Steve Taylor**

Mailing Address 515 Santa Paula Dr

City Salinas State CA Zip Code 93901

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2014

Transaction ID : **SB21B.7095**

Amount of Each Disbursement this Period

740.89

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2218.76

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)

**A. Steve Taylor**

Mailing Address 515 Santa Paula Dr

City Salinas State CA Zip Code 93901

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2014

**Transaction ID : SB21B.7096**

Amount of Each Disbursement this Period

714.80

Full Name (Last, First, Middle Initial)

**B. Steve Taylor**

Mailing Address 515 Santa Paula Dr

City Salinas State CA Zip Code 93901

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2014

**Transaction ID : SB21B.7097**

Amount of Each Disbursement this Period

562.46

Full Name (Last, First, Middle Initial)

**C. Valentine Direct Marketing LLC**

Mailing Address 5415 Maple Ave, Suite 230

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
PAC Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2014

**Transaction ID : SB21B.7002**

Amount of Each Disbursement this Period

1236.43

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2513.69

22405.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)

**A. Intuit**

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Non-Contribution Acct: Accounting Software

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.7013**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Intuit**

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Non-Contribution Acct: Accounting Software

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.7088**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Jamie King**

Mailing Address 106 Panorama Ct

City Trophy Club State TX Zip Code 76262

Purpose of Disbursement  
Non-Contribution Acct: Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.6964**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

Full Name (Last, First, Middle Initial)

**A. Jamie King**

Mailing Address 106 Panorama Ct

City State Zip Code  
Trophy Club TX 76262

Purpose of Disbursement  
Non-Contribution Acct: Reimbursement: Supplies/Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2014

**Transaction ID : SB29.6977**

Amount of Each Disbursement this Period

291.12
--------

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 200 N Kimball Ave, Ste 221

City State Zip Code  
Southlake TX 76092

Purpose of Disbursement  
Event Supplies: Badges/Toner

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2014

**Transaction ID : SB29.6977.0**

Amount of Each Disbursement this Period

139.12
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Category/  
Type

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

291.12
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2321.02
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 33 OF 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Koch &amp; Hoos, LLC</b>	Nature of Debt (Purpose): PAC Accounting/Compliance Services
Mailing Address 901 N Washington St, Ste 700	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="3767.75"/>	<b>Transaction ID : SD10.6869</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3767.75"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Pixl Production</b>	Nature of Debt (Purpose): PAC Website Development
Mailing Address 1845 Woodall Rodgers, Suite 1725	
City State Zip Code Dallas TX 75201	

Outstanding Balance Beginning This Period <input type="text" value="1966.32"/>	<b>Transaction ID : SD10.6867</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1966.32"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>George Seay III</b>	Nature of Debt (Purpose): PAC Event Expense: Reception/Food & Bev./AV Support
Mailing Address 325 North Saint Paul St Suite 3500	
City State Zip Code Dallas TX 75201	

Outstanding Balance Beginning This Period <input type="text" value="1441.00"/>	<b>Transaction ID : SD10.6679</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1441.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 34 OF 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): PAC Event Expense: Reception/Food & Bev./AV Support
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 3426.14	<b>Transaction ID : SD10.6845</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3426.14

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): PAC Event Expense: Reception/Food & Bev./AV Support
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 5000.00	<b>Transaction ID : SD10.6846</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): PAC Event Expense: Reception/Food & Bev./AV Support
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 5000.00	<b>Transaction ID : SD10.6847</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	13426.14
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 35 OF 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): Non-Contribution Acct: PAC Event Deposit
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 11950.00	<b>Transaction ID : SD10.6860</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): PAC Event Expense: Reception/Food & Bev./AV Support
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 10230.07	<b>Transaction ID : SD10.6848</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10230.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 2733.25	<b>Transaction ID : SD10.6852</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2733.25

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	24913.32
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 36 OF 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 740.89	<b>Transaction ID : SD10.6853</b>	
Amount Incurred This Period 0.00	Payment This Period 740.89	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 714.80	<b>Transaction ID : SD10.6854</b>	
Amount Incurred This Period 0.00	Payment This Period 714.80	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 562.46	<b>Transaction ID : SD10.6855</b>	
Amount Incurred This Period 0.00	Payment This Period 562.46	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 37 OF 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 992.77	<b>Transaction ID : SD10.6856</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 992.77

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 635.31	<b>Transaction ID : SD10.6858</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 635.31

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period 553.83	<b>Transaction ID : SD10.6859</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 553.83

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2181.91
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 38 OF 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steve Taylor</b>	Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr	
City State Zip Code Salinas CA 93901	

Outstanding Balance Beginning This Period <input type="text" value="612.07"/>	<b>Transaction ID : SD10.6861</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="612.07"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="612.07"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="41133.44"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="41133.44"/>